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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *No S.Y.*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *No S.Y.*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance <i>Susy Yacob S.Y.</i> Examiner's Signature Initials	TAIWAN	3	3	1

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## TITLE

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